

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM
DR-2

(Rev. 07/2004)

DISCLOSURE
REPORT

For Office Use Only

Comm. # 1452
Logged In _____
Scanned _____
Computer NO
Audited _____

Late reports are subject to possible civil and criminal penalties.

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD - 36

IMPORTANT: Indicate by # type of committee you are reporting for: ☐

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name Karen Balderston Political Party (if applicable) Republican
Office Sought pin 1-05 District (if Senate or House) 36
Representative

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A January 19, 2003 REPORT FOR (1) ELECTION /(2) NON-ELECTION YEAR.
(report date) Indicate by # ☐

☒ CHECK IF AMENDMENT TO REPORT DATED January 19, 2003

☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

435.95? this # is from IECDB

ADD TOTAL MONEY TAKEN IN THIS PERIOD math ever s/B 14,052.45

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

15,052.45 (13172.45+1030-150)

Schedule F: Loans Received total (Attach Schedule F)

3600.55 (2000+1500+100.55)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 19,088.95

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

21,014.20 (20761.46+252.74)

Schedule F: Loan Repayments total (Attach Schedule F)

100.25

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

-2,025.50

****UNPAID BILLS** (From Schedule D - Attach Schedule D) 14 \$ 2679.56

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) \$ 3625.55

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) s/B 4579.56 \$ 7,395.74

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES ☒ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

* 1448.50 debt on original report not included - forgiven?

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD - 36

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-18-02	ID# CK#	Chet & Janet Sullivan 2210 27th Street Marion, Iowa 52302		\$100	<input type="checkbox"/>
10-11-02	ID# 6155 CK#	Taxpayers United PO Box 209 Muscatine, Iowa		500	<input type="checkbox"/>
11-01-02	ID# CK#	Dan Diehl unknown		100	<input type="checkbox"/>
11-01-02	ID# CK#	G & J Neighbor 3249 Lafayette Road Alburnett, Iowa 52202		200	<input type="checkbox"/>
11-21-02	ID# CK#	Larry & Mary Slife 4789 N. Alburnett Road Central city, Iowa		30	<input type="checkbox"/>
10-21-02	ID# 6818 CK#	Iowa Optometric Association 1454 30th Street Ste 204, WDSM Iowa *** previously reported as \$150		100 (150.)	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL
 s/b 880.00
TOTAL (if last page of this schedule)

\$ 1030
\$ 1030

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE
B
(Rev. 07/03)

MONETARY
EXPENDITURES

☒ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD - 36

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11-08-04	ID# CK# 741	Health & Beauty 600 Franklin Street Center Point, Iowa	Used wrong acct, personal expense later reimbursed	\$ 51.94
11-15-02	ID# CK# 743	Mastercard Address unknown	paid 4 months of internet service	100.55
12-31-02	ID# CK#	Karen Balderston 3978 Sutton Road Central City, Iowa	ending balance once checks cleared, closed out account	100.25
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 252.74

TOTAL (if last page of this schedule) \$ 252.74

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD - 36

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
03-xx-02	Karen Balderston 3978 Sutton Road Central City, Iowa 52214	Open Bank Account	\$ 100.00
08-16-02	Karen Balderston 3978 Sutton Road Central City, Iowa 52214	Loan to Campaign	200.00
11-22-02	Karen Balderston 3978 Sutton Road Central City, Iowa 52214	Loan to campaign in order to cover outstanding checks and close out account	879.56
11-04-02	Karen Balderston 3978 Sutton Road Central City, Iowa 52214	Loan to Campaign	1,500.00
SUB-TOTAL			\$ 2,679.56
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 2,679.56

Previously shown as contribution

S/B on Sch F

S/B on Sch F

Previously reported

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1
(for Schedule D)**CANDIDATE COMMITTEES NOTE:**

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD - 36

Reset Form

SCHEDULE
E
(Rev. 06/97)

IN KIND
CONTRIBUTIONS

☒ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
xx-xx-02	Karen Balderston 3978 Sutton Road Central City, Iowa 52214	self	mileage - est 2,500 miles @ \$.29	\$ 725.00	<input type="checkbox"/>
10-30-02	Karen Balderston 3978 Sutton Road Central City, Iowa 52214	self	Radio Ads	370.44	<input type="checkbox"/>
10-30-02	Karen Balderston 3978 Sutton Road Central City, Iowa 52214	self	Billboards	3,525.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 4,620.44	
TOTAL (if last page of this schedule)				\$ 4,620.44	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

SCHEDULE

F

(Rev. 07/03)

**LOANS
RECEIVED
& REPAYED**

☒ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME(Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD - 36

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 3,525.00

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
11-15-02	Karen Balderston 3978 Sutton Road Central City, Iowa	self	\$ 100.55

TOTAL (PART I)

\$ 100.55

* Not a loan - see sch B

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
12-31-02	Karen Balderston 3978 Sutton Road Central City, Iowa	self	\$ 100.25

TOTAL CASH REPAYMENTS (PART II)

\$ 100.25

From Schedule E -- TOTAL LOANS FORGIVEN

\$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 7395.74

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Notice of Dissolution

Mail to:
IECDB
510 East 12th, Suite 1A
Des Moines, Iowa 50319

JAN - 7 2005

pm 1-05

FORM	(Rev. 07/03)
DR-3 NOTICE OF DISSOLUTION	
For Office Use Only	
Comm. #	1452
Indexed	
Audited	
Computer	
Certified Date of Dissolution	

COMMITTEE NAME

Committee for Karen Balderston, Statehouse HD - 36	
Official Name of Committee	
3978 Sutton Road	
Street	
Central City, Iowa 52214	
City, State, Zip Code	
319	842-2202
()	
Area	Telephone
Code	

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred;
2. All campaign funds have been spent;
3. All campaign property sold or transferred (candidates only); and
4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed

Karen Balderston
Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

January 5, 2005
Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 01/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1452
Indexed	
Audited	
Computer	
LA ETHICS & CAMPAIGN DISCLOSURE BOARD JAN 21 2003 FAX FILED DATE SIGNED	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD-36

IMPORTANT: Indicate type of committee you are reporting for: ☒ 1

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
 (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
 (8) Support State of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name

Karen Balderston

Political Party

Republican

Office Sought

Representative

District (if Senate or House)

HD 36

Karen Balderston

SIGNATURE OF TREASURER (or person filing this report)

319.241.1012

TELEPHONE

Jimmie H. 2003

DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A January 19, 2003 REPORT FOR AN/A (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate one ☒ 1☐ CHECK IF AMENDMENT TO REPORT DATED _____☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

51,845.95

385.95

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

13,172.45

Schedule F: Loans Received total (Attach Schedule F)

7,395.44

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

-00-

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

20,953.84

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....

20,761.46

Schedule F: Loan Repayments total (Attach Schedule F)

-00-

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

Campaign Acct
Closed on 1-6-03
amt. Remaining in Acct for Credit Card

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

1,448.50 Debt

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

26,452.22

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

7,395.44

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES☐ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

-00-

For Instructions, See Back of Form

CONTRIBUTIONS — MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderson, Statehouse HD36

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
✓ 10-16-02	ID# 6069 CK#	IOWA INDUSTRY PAC 904 Walnut St. Ste 100 DES MOINES IA	none	\$ 750. ⁰⁰	
✓ 10-16-02	ID# 6485 CK#	Krause Gen. Corp. (address unknown)	none	100. ⁰⁰	
10-17-02	ID# CK#	Mark Douglas 1104 34th St. Cedar Rapids IA	none	200. ⁰⁰	
10-17-02	ID# CK#	Tom & Marilyn Mark 306 19th St. SE Cedar Rapids IA	none	100. ⁰⁰	
10-17-02	ID# CK#	Jack and Dorothy Schwartz 2445 A Ave. Marion IA 52302	none	50. ⁰⁰	
10-17-02	ID# CK#	Melvin & Judi Koski 4046 Indian Creek Road Marion, Iowa	none	15. ⁰⁰	
10-18-02	ID# CK#	Edward Winter 1000 13th St. N.W. Cedar Rapids IA	none	20. ⁰⁰	
10-18-02	ID# CK#	Dwayne & Mary Ann Beckner 4001 Indian Creek Way Marion IA	none	25. ⁰⁰	
10-18-02	ID# CK#	Charles Errington 3210 26th Ave Marion Iowa	none	15. ⁰⁰	
10-19-02	ID# CK#	Clair Lensing 1890 Country Club Drive Marion Iowa 52302	none	100. ⁰⁰	

SUB-TOTAL

\$ 1375.⁰⁰

TOTAL (If last page of this schedule)

\$

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Page 1 of 5
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN
(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD36

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-19-02	ID# CK#	Kevin & Helen Royer Marion IA ph 319-373-6636	none	\$ 25. ⁰⁰	
10-19-02	ID# CK#	Lloyd and Norma Lucas 2120 17th Ave Marion IA 52302	none	25. ⁰⁰	
10-20-02	ID# CK#	Tim Wentz 2255 Northview Drive Marion, Iowa 52302	none	5. ⁰⁰	
10-20-02	ID# CK#	* Karen Balderston 3978 Sutton Road Central City Reimb (campus) acct gift for Chuck Larson	Self	52. ⁴⁵	
✓ 10-20-02	ID# CK#	DEERE PAC 666 Grand Ave, Ste 1707 DES MOINES IA 50309	none	25. ⁰⁰	
10-20-02	ID# CK#	John S. Koch 2155 Cottage Grove Pl SE Cedar Rapids IA 52403	none	25. ⁰⁰	
✓ 10-21-02	ID# CK#	IT Cable VTC address unavailable (ck & ID #s not found)	none	150. ⁰⁰	
✓ 10-21-02	ID# 6818 CK#	IA CITICMETRIC ASSN 1454 - 30th St. Ste 204	none	15. ⁰⁰	
✓ 10-21-02	ID# CK#	GUIDE ONE PAC (Pertinent info is unavailable/ not found)	none	15. ⁰⁰	
10-22-02	ID# CK#	Carl & Norma Haines PO Box 217 Marion IA 52302	none	cash 100. ⁰⁰	

* Listed on Sch B of prior report, 1202.45
as reverse entry

SUB-TOTAL

\$1212.45

TOTAL (If last page of this schedule)

\$

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Page 2 of 5
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS — MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD36

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
✓ 10-22-02	ID# CK# <i>Wired Funds to FSB</i>	<i>Legislative Majority Fund RPI, STATE ACCT 621 E. 9th, DES MOINES IA 50309</i>	<i>none</i>	<i>\$ 795.⁰⁰</i>	
	ID# CK# <i>(see bank acct page)</i>				
10-23-02	ID# CK#	<i>Lynn & Thelma Millard 2585 - 25th Ave Marion, IA 52302</i>	<i>none</i>	<i>25.⁰⁰</i>	
✓ 10-23-02	ID# CK# <i>5064</i>	<i>"FAC PAC" Fareway Stores The PAC 2600 E. 8th St, Boone IA 50036</i>	<i>none</i>	<i>100.⁰⁰</i>	
10-24-02	ID# CK#	<i>David & Martha Booth 2671 27th Ave Marion IA 52302</i>	<i>none</i>	<i>100.⁰⁰</i>	
10-24-02	ID# CK#	<i>Cliff Wildes 2440 21st Ave Marion IA 52302</i>	<i>none</i>	<i>5.⁰⁰</i>	
10-25-02	ID# CK#	<i>Norm & Jan Hlas 1826 Radio Road Marion IA 52302</i>	<i>none</i>	<i>25.⁰⁰</i>	
10-25-02	ID# CK#	<i>Bob and Monica Gleason 992 8th St. Marion IA 52302</i>	<i>none</i>	<i>50.⁰⁰</i>	
10-26-02	ID# CK#	<i>Joe and Becky Petter 1050 Indian Creek Circle Marion IA 52302</i>	<i>none</i>	<i>300.⁰⁰</i>	
10-26-02	ID# CK#	<i>Ron and Audrey Lancharr 1700 Bayview Rd Marion IA 52302</i>	<i>none</i>	<i>25.⁰⁰</i>	

SUB-TOTAL

\$ 7470.⁰⁰

TOTAL (if last page of this schedule)

\$

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Page 3 of 5
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 06/97)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Haren Balderson, Statehouse HD36

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
✓ 10-28-02	ID# 6218 CK# 11899	NFIB - Iowa Safe Trust 1201 F St. NW Ste 200 Washington DC 20004	none	\$ 250. ⁰⁰	
10-28-02	ID# CK#	Mary Lang Brooklyn IA	none	50. ⁰⁰	
10-29-02	ID# CK#	Clarence & Lynn Hoffman Red Oak, IA	none	1,000. ⁰⁰	
	ID# CK#	NOTE: Clarence inadvertently sent an amt intended for his daughter; which I immediately refunded (campaign check #742)			
10-31-02	ID# CK#	Clarence & Lynn Hoffman Red Oak IA	none	300. ⁰⁰	
10-31-02	ID# CK#	Mr & Mrs. James Caraway 1515 Secrist Road Marion IA 52302	none	50. ⁰⁰	
10-31-02	ID# CK#	Mike and Marilyn Gleason 6334 So. Pinedale Centennial CO 80016	none	100. ⁰⁰	
10-31-02	ID# CK#	Terry DePenning 5406 Smithland Drive Marion IA 52302	none	50. ⁰⁰	
✓ 11-01-02	ID# 6234 CK# 3855	IFBF PAC 5400 University Ave W. W. Des Moines IA	none	1,000. ⁰⁰	
11-02-02	ID# CK#	Jim & Sharon Grest 5404 Prairieburg Road Monticello IA 52300	none	25. ⁰⁰	

SUB-TOTAL

\$ 2,825.⁰⁰

TOTAL (If last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 4 of 5
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD36

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	IF FOR FUND-RAISER INCOME
11-05-02	ID# CK# 6359	PFIZER PAC 235 E. 42nd St. New York, New York 10017	None	\$ 300.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL

\$ 300.00

TOTAL (if last page of this schedule)

\$13,172.45

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 5 of 5
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN
(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderson Statehouse HD 36

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderson, Statehouse HD 36

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-16-02	ID# CK# 781	Cornerstone Printing 705 N. Center St. Rd Hawatha IA 52332	5,000 Brochures	\$ 636.00
10-16-02	ID# CK# 782	Copy Works 4837 1st Ave SE Cedar Rapids IA	3000 Letters (Copied) of Gordon Bohannon's Letter of Support for me	286.20
10-17-02	ID# CK# 783	U.S. P.S. Marion, IOWA	4 Rolls (374) Stamps for mailings	148.00
10-18-02	ID# CK# 784	Voided this check (due to Error)		
10-18-02	ID# CK# 785	In Sync 111 21st Ave SW (Ste A) Cedar Rapids IA 52404	750 additional yard signs	2,232.90
10-18-02	ID# CK# 786	Tiffy Lube 875 Ave Marion, IA	Oil change and filter for auto used for campaign	45.18
10-18-02	ID# CK# 787	Voided this check (Due to Error)		
10-18-02	ID# CK# 788	Sears MasterCard PO Box 182156 Columbus OH 43218-2156	Cling-On Vinyl Campaign Window Clings	826.37
SUB-TOTAL				\$4,174.45
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

Page 1 of 3

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD36

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-18-02	ID# CK# 789	Sears MasterCard PO Box 182156 Columbus OH 43218	Oct Billing Statement of Camp Expenses Billed to Credit Card	\$ 1591. ⁸⁸
10-20-02	ID# CK# 790	Victory Enterprises 5200 SW 30th St. Davenport IA 52802	Media Ads	10,423. ⁸⁴
10-21-02	ID# CK# 791	Copy Works 4837 1st Ave SE Cedar Rapids IA	Copies made of Disclosure Report to IA Ethics/Camp. Bd.	3. ⁸⁸
10-21-02	ID# CK# 792	Marion TIMES 876 Ave Marion, IA 52302	3 pages in the political tabloid ad section	850. ⁰⁰
10-23-02	ID# CK# 793	Linn Co. Auditor's Office 930 1st St. SW Cedar Rapids IA	LM precinct, R's and NP's (690 labels) by household	23. ⁰⁵
10-23-02	ID# CK# 794	Copy Works 4837 1st Ave SE Cedar Rapids IA	Letters and Return Labels for LM precinct	293. ⁶²
10-23-02	ID# CK# 795	Office Max Northland Mall Cedar Rapids, IA	Envelopes for letters and Gordon Bohannen's endorsement letter	33. ⁷⁸
10-23-02	ID# CK# 796	Copy Works 4837 1st Ave SE Cedar Rapids IA	700 Letters (w/ Blue Ink) @ 39¢ ea	289. ³⁸
SUB-TOTAL				\$ 13,509. ⁰¹
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

Page 2 of 3

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD 36

DATE EXPENDED (MM/DD/YYR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-24-02	ID# CK# 797	United States Post Office Marion IA 52302	9 Rolls Stamps for Monthly Brochures & Letters	\$ 333. ⁰⁰ -
	ID# CK# 798	VOIDED CHECK		
10-24-02	ID# CK# 799	Linn NEWSLETTER Central City IA 52224	2-page political ad published one week prior to Gen. Election	720. ⁰⁰ -
The next checks are out of numeric sequence, but are in (correct) chronological order.				
10-28-02	ID# CK# 740	Marion TIMES 8th Ave Marion Iowa 52302	2-page Ad in Marion TIMES weekly (one wk before election)	900. ⁰⁰
11-02-02	ID# CK# 742	Clarence Hoffman Red Oak IA	Returned amt of earlier check sent in error; He later sent \$300.	1,000. ⁰⁰ -
11-15-02	ID# CK#	Farmers State Bank 1240 8th Ave Marion IA 52302	Overdraft chgs	125. ⁰⁰
	ID# CK#			
SUB-TOTAL				\$3,078. ⁰⁰
TOTAL (If last page of this schedule)				20,761. ⁴⁶

OK -
see A**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(f).)

Page 3 of 3

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD36

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

SCHEDULE

D

(Rev. 08/98)

INCURRED
INDEBTEDNESS☐ CHECK THIS BOX
IF AMENDING
FORMDEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
09- 27- 02	Karen Balderston 3978 Sutton Road Central City IA 52014	Yard Signs purchased from In-Sync, Cedar Rapids, 111 21st Ave SW Suite A	\$ 1448.50
SUB-TOTAL			\$
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 1448.50

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1
(for Schedule D)

CANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD 36

Reset Form

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
* 10-25-02	Republican Party of IOWA (to Anderson Bros. Printing)	none	Printing Costs	\$ 6,462. ⁵⁴	<input type="checkbox"/>
* 11-07-02	Republican Party of Iowa (to The Mail House)	none	Postage, Processing	7,114. ⁷⁵	<input type="checkbox"/>
* 11-08-02	Republican Party of Iowa (to Victory Enterprises)	none	Radio Buy	300. ⁰⁰	<input type="checkbox"/>
* 11-08-02	Republican Party of Iowa (for Printing)	none	Printing	11,552. ⁹⁷	<input type="checkbox"/>
12-23-02	IFBF PAC 5400 University Ave. W, DES MOINES IA 50266	none	Polling	1,000. ⁰⁰	<input type="checkbox"/>
12-23-02	Karen Balderston 3978 Sutton Road Central City IA	Self	E-mail LIST OF VOTERS from Linn Co. Auditor's Office	21. ⁹⁶	<input type="checkbox"/>
					<input type="checkbox"/>
* 12-23-02	Address for RPT: 621 East 9th DES MOINES IA 50309				<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

RECEIPTDATE 10/25/02 NO. 7933RECEIVED FROM Karen Balderston

ADDRESS _____

FOR Email list of voters\$ 21.96# 1425BY [Signature]

©2001 REDIFORM 8LB17

TOTAL \$

Last \$

This
Date)n to the
atives
is noPage 1 of 1
(for Schedule E)26,452.²²Letters from In-Kind Contributors
accompany this Form.

Reset Form

SCHEDULE F (Rev. 08/96)	LOANS RECEIVED & REPAY
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for Karen Balderston, Statehouse HD36

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 3525.⁰⁰

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
4-15-02	Karen Balderston 3978 Sutton Road Central City IA (Remainder of Primary Billboards)	Self	\$ 3,525. ⁰⁰
5-16-02	Karen Balderston (Same as above) (Remainder of \$770. ⁴⁴ Primary Radio Ads)	Self	\$ 376. ⁴⁴
10-25-02	Karen Balderston same address (FIRST USA credit-card check)	Self	\$ 2,000. ⁰⁰
11-01-02	Karen Balderston (same)	Self	\$ 1,500. ⁰⁰

TOTAL (PART I)

\$ 7,395.⁴⁴

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II)

\$

From Schedule E - TOTAL LOANS FORGIVEN

\$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$

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Page 1 of 1
(for Schedule F)

Notice of Dissolution



Reset Form

FORM	(Rev. 07/02)
DR-3 NOTICE OF DISSOLUTION	
For Office Use Only	
Comm. #	1452
Indexed	
Audited	
Computer	
Certified Date of Dissolution	

COMMITTEE NAME

Committee for Karen Balderston, Statehouse HD-36	
Official Name of Committee	
3978 Sutton Road	
Street	
Central City IA 52214	
City, State, Zip Code	
319 241.1012	
Area Code	Telephone

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred. (LOANS made by candidate REMAIN on CREDIT CARD DEBT)
2. All campaign funds have been spent; &
3. All campaign property sold or transferred (candidates only): NA
4. A final report disclosing all transactions closing the committee. SEE BANK STATEMENTS FOLLOWING! (Remainder of expenses has fallen to credit cards to be paid by me.)

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

Karen Balderston

Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

January 18, 2003

Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.